only be relied upon when a portion has been inadvertently omitted from the submitted application parts 18. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label Correspondence address below Insert Customer No. or Attach bar code label here Matthew R. Schantz Name Woodard, Emhardt, Naughton, Moriarty and McNett Bank One Center/Tower Address 111 Monument Circle, Suite 3700 Zip Code 46204-5137 City Indianapolis State Country USA Telephone 317-634-3456 Fax 317-637-7561 Name (Print/Type) Matthew R. Schantz Registration No. (Attorney/Agent) 40,800 Signature Date: June 19, 2001

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Date of Deposit June 19, 2001

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Signature of person mailing paper or fee

FEE TRANSMITTAL **FOR FY 2001**

Complete if Known							
Application Number							
Filing Date	June 19, 2001						
First Named Inventor	WASYNCZUK, Oleg						
Group Art Unit							
Examiner Name							
Attaurant Dankat Number	16410 109						

Patent fees are subject to annual revision. First			irst Named	t Named Inventor WA			VASYNCZUK, Oleg				
			iroup Art L	up Art Unit							
See Forms PTO/SB/09-12.			xaminer N	miner Name							
			orney Docket Number			108					
				1	mey booker rumber			Fee Calculation (continued)			
Method of Payment (check one) 1. The Commissioner is hereby authorized to charge			3 ADD	3 ADDITIONAL FEES							
indicated fees and credit any over payments to.											
Deposit Acct. Name/# 23-3030 Woodard, Emhardt, Naughton, Moriarty & McNett				Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)		Fee Description	Fee Paid	
Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17					105	130	205	65	Surcharg	e – late filing fee or oath	
Applicant claims small entity status See 37 CFR 1.27					127	50	227	25	Surcharg cover sh	e – late provisional filing fee c eet	or
2. Payment Enclosed					139	130	139	130	Non-Eng	lish specification	
. X											
	X Check	<u></u> <u>N</u>	loney Order	Other	_						
		e Calculati	on		147	2,520	147	2,520		a request for reexamination	
L BASIC FILIN	G FEE				112	920*	112	920*	Requesti Examine	ng publication of SIR prior to r action	
Large Entity	(\$) Fee	Entity Fee (\$)		Fee Paid \$	113	1,840*	113	1,840*	Requesti Examine	ng publication of SIR after raction	
Code 101 710	Code 201 (355	_ ,	355.00	115	110	215	55	Extensio	n for reply within first month	
Code 710 710 320 320 490	206	160	Fee Design Filing Fee		116	390	216	195	Extensio	n for reply within second mont	h
107 490	207	245	Plant Filing		117	890	217	445	Extensio	n for reply within third month	
108 710	208	355	Fee Reissue Filing Fee		118	1,390	218	695	Extensio	n for reply within fourth month	
114 150	214	75	Provisional Filing Fee		128	1,890	228	945	Extensio	n for reply within fifth month	
SUBTOTAL (1) (\$) 355.00			119	310	220	155	Notice of	Appeal			
2: EXTRA CLA	IM FEES				120	310	220	155	_	orief in support of an appeal	
		Extra Claims	Fee From Below	Fee Paid	121	270	221	135	Request	for oral hearing	
	28 -20**	= 8	x 9 =	\$ 72.00	138	1,510	138	1,510	Petition to	to institute a public use ng	
	3 - 3**	= 0	X =	-0-	140	110	240	55	Petition ¹	to revive – unavoidable	
Multiple Dependent				141	1,240	241	620		to revive - unintentional		
			reissues, see be		142	1,240	242 242	620 220		sue fee (or reissue) ssue fee	
Large Entity Fee Fee Code		Entity Fee (\$)	Fee Descriptio	n	143	440	242	220	Design	3340 100	
103 18	203	9	Claims in excess of 20		144	600	244	300	Plant issue fee		
102 80	202	40	Independent of excess of 3	laims in	122	130	122	130		to the Commissioner	
104 270	204	135	Multiple depen not paid			50	123	50	applicati		
109 80	209	40	**Reissue inde claims over on		126	240	126	240	Stmt	sion of Information Disclosure	
110 18	210	9	**Reissue clair of 20 and over patent		581	40	581 (40		ng each patent assignment pe (times number of properties)	r \$ 40.00
SUBTOTAL (2) (\$) 72.00			146	710	246	355	(37 ČFF	Filing a submission after final rejection (37 CFR 1.129(a))			
*reduced by Basic Filling Fee Paid			149	710	249	355		n additional invention to be ed (37 CFR 1.129(b))			
.ougood by De		-=			179	710	279	355	(RCE)	for Continued Examination	
					169	900	169	900		t for expedited examination of application	a
SUBMITTED BY						· 	<u> </u>	SUBTO		\$ 40.00	
Typed or Printed Name							Date:			Complete (if app	
Matthew R. Schantz							9, 2001			40,800	
Signature AH - 1										Deposit Account User ID	